

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10624005 FILING DATE AA-579
 APPLICANT(S) _____

CLAIMS						
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.	5					
TOTAL DEP.	7					
TOTAL CLAIMS	12					